

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213551315				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: COSTCO WHOLESALE CORPORATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: WA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 1/31/2013</p> <p>SCC ID NO: F1324088</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000
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COMMON	1,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 999 LAKE DRIVE</p> <p style="margin-left: 40px;">CITY/ST/ZIP: ISSAQUAH, WA 98027</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: WALTER CRAIG JELINEK TITLE: PRESIDENT ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: WALTER CRAIG JELINEK TITLE: PRESIDENT ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME:	Richard J Olin	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	Patrick J Callans	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	John M Minola	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	John C Sullivan	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	Margaret E McCulla	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	45940 Horseshoe Drive		
CITY/ST/ZIP/CO:	Sterling, VA 20166		
NAME:	James Sinegal	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	Jeffrey H Brotman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	999 Lake Drive		
CITY/ST/ZIP/CO:	Issaquah, WA 98027		
NAME:	Benjamin S Carson, SR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	600 N. Wolfe Street		
CITY/ST/ZIP/CO:	Harvey 811 Baltimore, MD 21287-8811		
NAME:	Charles T Munger	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	355 S. Grand Avenue		
CITY/ST/ZIP/CO:	34th Floor Los Angeles, CA 90071		
NAME:	Daniel J Evans	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4000 NE 41st St.		
CITY/ST/ZIP/CO:	Building D, Suite 4 Seattle, WA 98105		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Hamilton E James DIRECTOR 345 Park Avenue 31st Floor New York, NY 10154	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeffrey S Raikes DIRECTOR 1551 Eastlake Avenue E Seattle, WA 98102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jill S. Ruckelshaus DIRECTOR c/o Diane Hodgson 1000 2nd Avenue, #3700 Seattle, WA 98104	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John W Meisenbach DIRECTOR 1325 - 4th Ave., #2100 Seattle, WA 98101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Richard M Libenson DIRECTOR 4455 Morena Blvd. San Diego, CA 92117	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Susan L Decker DIRECTOR P.O. Box 69 Belvedere, CA 94920	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	William H Gates DIRECTOR P.O. Box 23350 Seattle, WA 98102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GAIL ELLEN TSUBOI SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GAIL ELLEN TSUBOI, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	12/4/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			